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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 09/975,458 Confirmation No. 9828
Applicant : Gordon T. Brown
Filed : October 11, 2001
Title: AUTOMATED ACCOUNTING SYSTEM
TC/A.U. : 3628
Examiner : Debra F. Charles

Docket No. : 47781-6
Customer No. : 29694

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GROUP 3600

Commissioner for Patents
P.O. Box 1450
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December 1, 2003

RESPONSE TO NOTICE OF NON-COMPLIANT AMENDMENT

Sir:

This is in response to the Notice of Non-Compliant Amendment dated November 21, 2003, stating that a complete listing of all of the claims is not present. Enclosed please find the corrected section of the Preliminary Amendment dated October 23, 2002 entitled "Amendments to the Claims" (pages 2-8). The corrected Listing of the Claims notes that Claims 1-27 are cancelled.

In the event that any outstanding matters remain in connection with this application, the Examiner is invited to telephone the undersigned at (412) 263-4340 to discuss such matters.

Respectfully submitted,

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3628

PTO/SB/21 (08-03)

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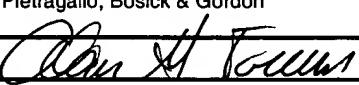
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		Application Number	09/975,458
		Filing Date	October 11, 2001
		First Named Inventor	Gordon T. Brown
		Art Unit	3628
		Examiner Name	Debra F. Charles
Total Number of Pages in This Submission		Attorney Docket Number	47781-6

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
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<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	-corrected Amendments to the Claims section
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		GROUP 3
Firm or Individual name	Alan G. Towner Pietragallo, Bosick & Gordon	
Signature		
Date	December 1, 2003	

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Typed or printed name	Alan G. Towner		
Signature		Date	December 1, 2003

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